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CONFIRMATION NO. 9136

| SERIAL NUMBER | FILING or 371(c) DATE | CLASS | GROUP ART UNIT | ATTORNEY DOCKET NO. | | |
|--|---|---|-------------------------------|---|---------------------------|--------------------------------|
| 10/694,387 | 10/28/2003 | 165 | 3744 | 2507-8634.1US(22235-US-14 | | |
| RULE | | | | | | |
| APPLICANTS Edward J. Krolczek, Davidsonville, MD; Michael Nikitin, Ellicott City, MD; David A. Wolf SR., Baltimore, MD; | | | | | | |
| ** CONTINUING DATA ***** This appln claims benefit of 60/421,737 10/28/2002 and claims benefit of 60/514,670 10/28/2003 and is a CIP of 10/676,265 10/02/2003 which claims benefit of 60/415,424 10/02/2002 This application 10/694,387 10/28/2003 is a CIP of 10/602,022 06/24/2003 PAT 7,004,240 which claims benefit of 60/391,006 06/24/2002 and is a CIP of 09/896,561 06/29/2001 PAT 6,889,754 which claims benefit of 60/215,588 06/30/2000 | | | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | | | |
| ** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 03/11/2004 | | | | | | |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/LILIANA V CIRIC/</u> <u>Examiner's signature</u> | | <input type="checkbox"/> Met after Allowance <u>Initials</u> | STATE OR COUNTRY MD | SHEETS DRAWINGS 35 | TOTAL CLAIMS 17 | INDEPENDENT CLAIMS 2 |
| ADDRESS TRASKBRITT, P.C./ ALLIANT TECH SYSTEMS P.O. BOX 2550 SALT LAKE CITY, UT 84110 UNITED STATES | | | | | | |
| TITLE HEAT TRANSFER SYSTEM | | | | | | |
| FILING FEE RECEIVED 2892 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |